 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Signature	☐ Agent ☐ Addressee
so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. D. D. D. B. D. D. C. D. C. D. D. D. C. D. D. D. C. D. D. D. C. D. D. D. D. C. D.	Date of Delivery
1. Article Addressed to:	 D. Is delivery address different from item 1? If YES, enter delivery address below: 	☐ Yes ☐ No
Sun Terminals of Louisiana c/o Sun Terminals Inc. of Louisiana Registered Agent for Sun Terminals, Inc. of Louisiana	9490757	
907 South Detroit St. Tulsa, Oklahoma 74102	3. Service Type Certified Mall Registered Receipt fo	or Merchandise
:	4. Restricted Delivery? (Extra Fee)	☐ Yes
2. Article Number (Transfer from service label) 7014 0150	0000 2453 97,42	
PS Form 3811, February 2004 Domestic Re	turn Receipt1	02595-02-M-1540

